

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of)
 Paolo FONTANAZZI) Group Art Unit:
 Application No.: Unassigned) Examiner:
 Filed: August 31, 2006) Confirmation No.:
 For: GABLE-TOP PACKAGE FOR)
 POURABLE FOOD PRODUCTS AND)
 METHOD FOR DIMENSIONING)
 THEREOF)

FIRST INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

In accordance with the duty of disclosure as set forth in 37 C.F.R. § 1.56, the accompanying information is being submitted in accordance with 37 C.F.R. §§ 1.97 and 1.98.

The relevance of the listed documents is their citation in the attached International Search Report and Written Opinion of the International Searching Authority in the corresponding PCT application.

To assist the Examiner, the documents are listed on the attached form PTO-1449. It is respectfully requested that an Examiner initialed copy of this form be returned to the undersigned.

Respectfully submitted,

BUCHANAN INGERSOLL & ROONEY PC

Date August 31, 2006

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Substitute for form 1449A/PTO & 1449B/PTO

**FIRST
INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet 1 of 1

Sheet 1 of 1

Complete if Known

10/591253

Substitute for form 1449A/PTO & 1449B/PTO		<i>Complete if Known</i>	
FIRST INFORMATION DISCLOSURE STATEMENT BY APPLICANT <small>(use as many sheets as necessary)</small>		10/591253	
Sheet	1	of	1
		Application Number	Unassigned
		Filing Date	August 31, 2006
		First Named Inventor	Paolo FONTANAZZI
		Examiner Name	
		Attorney Docket Number	1034170-000032

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

NON-PATENT LITERATURE DOCUMENTS

Examiner Initials	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.
	International Search Report dated 07/27/2005.
	*Written Opinion of the International Searching Authority.

***Copy attached.**

Examiner Signature _____ **Date Considered** _____

***EXAMINER:** Initial if reference considered, whether or not citation is in conformance with M.P.E.P. § 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.